

**INCIDENTAL EXPENSES / CLOSING COSTS CERTIFICATION**

Name \_\_\_\_\_ Project \_\_\_\_\_

Address \_\_\_\_\_ Parcel \_\_\_\_\_ Code \_\_\_\_\_

Note: Do not include property taxes, interest, or insurance. These are ongoing expenses paid in advance at closing and are not reimbursable costs.

Item	Amount
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
<b>TOTAL</b>	<b>\$ _____</b>

I certify that I paid the above **Incidental Expenses** ☐ **Closing Costs** ☐ in purchasing my replacement dwelling at \_\_\_\_\_. I am providing paid receipts and/or closing statements as documentation that these costs have been incurred and paid. I further certify that this dwelling is my principal place of residence.

\_\_\_\_\_  
Date Relocatee

1. This relocatee (IS / IS NOT) \_\_\_\_\_ fully eligible to receive an RHP as a 180-day owner or 90-day owner/tenant. If fully eligible, indicate date of determination and address of dwelling used as basis for the determination.

\_\_\_\_\_  
Date Address of Correlated Comparable

2. This relocatee (IS / IS NOT) \_\_\_\_\_ eligible to receive \$ \_\_\_\_\_ as reimbursement for closing costs and/or incidental expenses.

\_\_\_\_\_  
Date Relocation Specialist